V. THE TIME SURVEY METHODOLOGY

Introduction

While some Local Health Jurisdictions will use continuous time documentation to allocate costs to the Medicaid Administrative Match program, most will use a Random Moment Time Survey (RMTS). Both methods ensure the accuracy and validity of time surveys, a recent concern of the federal Center for Medicare and Medicaid Services (CMS).

The details of both approaches are described below.

The Random Moment Time Survey

1. The RMTS asks the time survey participant to report the activity he/she was performing during the sampled moment using the federally approved activity codes included in the Quick Reference section of this manual. The RMTS is a form of continuous documentation. Samples are drawn for the corresponding quarters in which invoices for Medicaid Administrative Match are submitted. Random moments occur throughout the quarter. The moments are drawn from all the paid workdays in the quarter and all the minutes within these workdays. The random moments can be individualized to the employee's schedule, so they reflect the actual workday hours of all participating staff.

2. The sample is statistically valid. Federal policy has historically set the validity threshold for a random moment time survey at between 2200 and 2400 moments per quarter. While at the statewide level 2400 moments may be statistically valid, each LHJ claiming unit will submit its own invoice, based on its actual expenditures, unique time survey results, and MER.

   The sample size for each claiming unit's RMTS will be determined by the number of participants, up to the statistically valid threshold of 2400 moments per unit. This "tiered" option is well suited to Medicaid administrative claiming in local claiming units, where there is great variation in the number of employees. Staff at DSHS have reviewed the design of the sample and determined that it meets the 95% confidence-level, and complies with applicable federal standards.

3. The following standard will be used to establish the minimum number of moments for each local claiming unit:

   ▪ Local claiming units with 75 or more workers participating in the RMTS will generate a minimum of 2400 valid moments per quarter.

   ▪ Local claiming units with less than 75 workers participating in the RMTS will produce a minimum of 33 valid moments per worker per quarter. Since the sample is drawn randomly, not all workers will receive 33 moments, but the aggregate will be an average of 33 valid moments per worker.

4. Each local claiming unit will also over sample by 10%-20% to cover any invalid time surveys, and to accommodate employee resignations, or interdepartmental transfers that occur during a quarter.

5. The participants in a RMTS will include all staff in Cost Pool #1 and Cost Pool #2 who performs allowable Medicaid administrative activities, as defined by the RMTS Codes 3, 5, 8, 9, 10, 12, 14, 15, 16, 18, 19, 21, 23 and 24. The RMTS will not include individuals who will utilize continuous documentation to support claiming of their time and costs. This is discussed in the following section. Each individual has an equal chance of being sampled during the time survey period. With the use of a tiered approach, each LHJ claiming unit will have its own RMTS, with the statistically significant number of moments needed depending on the number of staff.

6. The RMTS will be managed centrally by the Washington State Association of Local Public Health Officials (WSALPHO). The sample for each participating entity will be drawn at WSALPHO electronically. RMTS forms will be sent or emailed through WSALPHO. RMTS data will be collected and aggregated through WSALPHO as well. Detailed quarterly RMTS reports will be prepared through WSALPHO for each agency. As the emails and response screens are set to the person level, the forms are slightly different for SPMP and non-SPMP staff. No SPMP codes are listed on the non-SPMP forms. The QA notice is included in the RMTS, and the response requires the activity description to be completed.

7. Local claiming units will have the option of using two methods in the RMTS to contact their staff and contractors – direct contact or electronic contact. Prior to the beginning of each quarter, the local claiming unit will send WSALPHO an electronically generated list of their RMTS participants, indicating whether the direct contact or electronic RMTS contact method will be used. Once the list is received, and the data uploaded, the jurisdiction-specific sample will be drawn. The methods are described briefly, as follows:

   The Direct Contact/Observer Method: In the direct contact/observer method, a designated RMTS Coordinator receives a master list of random moments and individual RMTS forms for all staff in his/her program at the beginning of each month of the quarter. When an individual is due to be sampled, the designated coordinator finds the person, asks him/her to complete the form, and collects the signed document. If the worker is not at his/her desk, the coordinator leaves the form for the worker to fill out upon his/her return. In claiming units where staff use pagers or cell phones with a voice mail function and are out of the office at the time of their random moment, the coordinator might contact the worker by leaving a message on the pager or cell phone's voice mail. The coordinator may ask the worker to mark the code that best describes the activity he/she was performing at that moment and leave the form on the worker's desk for signature. The completed forms are sent to WSALPHO for tabulation.

In this method, the employee receives an E-mail on the morning of the sample moment. The e-mail will contain the information on the random moment and the list of the time survey codes. The worker records the code that best describes the activity being performed at that moment and either completes the form electronically on a protected web site or prints out the form, completes it and routes it to his/her time survey coordinator. The time survey coordinator will send it on to WSALPHO for data entry and tabulation.

8. As noted earlier, each local claiming unit will create an electronic list of staff to be included in RMTS database each quarter. The database will be updated quarterly to reflect terminations, transfers, schedule changes and new employees. The RMTS will include all staff whose costs will be reported to Cost Pool #1 or #2 on the Automated Detail Invoice. The only exception will be staff that are hired after a quarter begins or who are out on extended leave. New hires will be added at the beginning of each quarter, after they have been trained.

9. Every person in the RMTS has an equal chance of being selected for any given random moment during work hours. The sample selection system considers all participants and all work "moments" for each moment selected.

10. Monitoring will be built into the RMTS process to ensure that staff complete their random moment documentation on a timely basis. Supervisors (or time survey coordinators) will be notified on a weekly basis of the random moments that have been sent to their staff for follow-up on those that have not been completed.

Continuous Time Documentation

Some local claiming units, particularly small ones and some contractors, have systems for continuous, 100% documentation of staff time and are able to direct charge time spent on Medicaid Administrative Match activities. These local claiming units use daily time keeping systems where staff report 100% of their time, by activity code, every day of their work year, either electronically or on paper.

LHJ claiming units doing continuous time reporting over the quarter will report all matchable activity in increments of no less than 15 minutes, which will then be reported as direct charges on the automated invoice. Non-matchable activity will also be reported as a specific program function. In this manner they are able to capture the amount of time and cost allocable to Medicaid administrative match activities.

Local claiming units using this method will incorporate the federally approved MAM activity codes included in the Quick Reference section of this manual into the list of activities employees report on an ongoing basis. All activity is documented in the same manner as the RMTS. SPMP will also note the medical skills/training needed for the activity being performed.

Training requirements are the same as for staff in the RMTS.